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CONFIRMATION NO. 1199

<b>SERIAL NUMBER</b> 10/698,046	<b>FILING OR 371(c) DATE</b> 10/30/2003 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> 5259-10801
<b>APPLICANTS</b> Michael E. Landry, Austin, TX; Larry T. Khoo, Studio City, CA;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/422,453 10/30/2002 <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/29/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 19	<b>TOTAL CLAIMS</b> 37
				<b>INDEPENDENT CLAIMS</b> 10
<b>ADDRESS</b> 23492				
<b>TITLE</b> Spinal stabilization system using flexible members				
<b>FILING FEE RECEIVED</b> 1808	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

*OK FCC*  
*None FCC*